Approved for use through 07/31/2006. OMB 0651-0032

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·	DECLARATIO	N FOR LITIL		torney Docket Number	pro se							
		ESIGN	Fir	rst Named Inventor	Dov JACOBSON	lov JACOBSON						
		APPLICATIO	N	COMPLETE IF KNOWN								
	(37 (CFR 1.63)	Ar	Application Number								
	Declaration	Declara	iuon	ling Date								
لنا	Submitted OR With Initial		ted after Initial Ar	t Unit								
	Filing	(37 ČFI require	R 1.16 (e)) Ex	aminer Name		<i></i>						
I here	I hereby declare that:											
Each	inventor's residence, r	nailing address, a	and citizenship are as	stated below next to	their name.							
l belie	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for											
	a patent is sought on											
MO	USE PERFORM	ANCE IDEN	TIFICATION									
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(Title of the Invention)												
_	ecification of which											
~	is attached hereto											
_	OR	· · · · · · · · · · · · · · · · · · ·										
	OR was filed on (MM/DD	/YYY)		as United States Ap	plication Number or P	CT International						
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	was filed on (MM/DD		and was amended o	n (MM/DD/YYYY)		(if applicable).						
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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	er Number	:			OR	V	Corres	pondence address below
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I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardiz	e true; and fur de are punishal	ther that ble by fine	these state or imprise	ement	were	made	with	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		Пар	etition	has be	en filed	l for thi	s unsiar	ned inventor
Given Name	• •	-			F	amily N	Jame		
(first and middle [if any]) Dov					or Surname Jacobson				
Inventor's	7 11	2.	<u> </u>	-					Date
Signature		3 6	Fee						March 31 2004
Residence: City	State			Country Ci			Citizer	itizenship	
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Mailing Address 620 Lakeshore Drive									
City	ity State		ZIP			Country			
Berkeley Lake Georgia				30096-3038				USA	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name		•	Family Name						
(first and middle [if any])					or Surname				
Inventor's Signature					·				Date
Residence: City State			Country		Citizensh		Citizer	nship	
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State			ZIP				Country		
Additional inventors or a legal re	presentative are bei	ng named or	n thes	uppleme	ntal shee	et(s) PTC	/SB/02A	or 02LR a	attached hereto.